

# Parent Feedback Form

## Prevention and Early Intervention of Torticollis/Plagiocephaly

Thank you for taking the time to complete this feedback form. Your input will help us in structuring future parental resources in order to provide the best care for your child.

**Overall, how satisfied are you with the Resources Provided?**

- Very Satisfied       Satisfied       Neutral       Unsatisfied       Very Unsatisfied

Provide one example that reinforces your selection:

**Was the provided information useful? (i.e., were you able to use some of the tools at home)**

- Definitely       Somewhat       Unsure       Not Really       Definitely Not

Why or Why Not?

**Do you think the information was well organized and easy to follow?**

- Definitely       Somewhat       Unsure       Not Really       Definitely Not

Please tell us why:

**Was the information easy to access?**

- Definitely       Somewhat       Neutral       Not Really       Definitely Not

Why or Why Not?

**Do you have any suggestions for the pamphlet or video resource?**

**Any additional comments/concerns:**